



**Application for Short-Term Landfill Permit
Bureau of Land and Waste Management**

Office Use Only	
<input type="checkbox"/> Approved	Initials _____
<input type="checkbox"/> Not Approved	Date _____

Submit to: Division of Mining and Solid Waste Permitting, Bureau of Land and Waste Management
SC Department of Health and Environmental Control, 2600 Bull Street, Columbia, SC 29201-1708
(Please Print or Type)

Short-Term landfills are limited to the following:

1. Structural fill of areas that have never received construction or demolition waste;
2. Operating a landfill with a proposed life of one (1) year or less;
3. Occupying one (1) acre or less;
4. Receiving only land-clearing debris, hardened concrete, hardened/cured asphalt, bricks and blocks that have not come in contact with lead-based paint or any hazardous constituents, e.g., petroleum products, pesticides, chemical (no free metals); and
5. Must be in an area where zoning allows for landfill activities.

I. Name of project: _____

II. Physical location (directions to project - use street names, county road numbers etc.): _____

_____ County: _____

III. Facility's name, mailing address: _____

_____ Telephone number: _____

IV. Operator's name, mailing address (if different from name of facility): _____

_____ Telephone number: _____

V. Landowner's name, mailing address (if different from name of facility or operator): _____

_____ Telephone number: _____

VI. Brief description of proposed landfill: _____

● List specific type(s) of waste to be disposed and source of generation: _____

● List proposed expected life of the landfill (not to exceed one(1) year): _____

● Expected start date: _____

● Estimate the total capacity of the landfill: _____

● Estimate the expected volume of solid waste the landfill will receive over the operational life of the landfill: _____

● The frequency at which the landfill will receive that waste, e.g., one-time disposal, periodic, continuous, etc.: _____

● List frequency of covering (at least monthly): _____

● List the source and description of cover material to be used: _____

● Attach a copy of a 7.5 min. quad map (U.S. Geological Survey topographic map, including the legend and name of the quad) with disposal area marked to scale.

- Attach data showing the seasonal high water table, to be determined based on data from 3 hand auger borings (at least 3 inches in diameter) bored to a depth of 5 feet. The holes shall be bored at the lowest point in the fill area and at two other points in the fill area. Record the water level in the borings after allowing them to stand for 24 hours.
- Attach a county map with the landfill location outlined on it
- Attach a letter of proof of proper zoning
- Attach a site plan on a scale of not greater than 200 feet per inch to identify the following:
 - Property boundaries, landfill footprint, and location of any buildings, fences, gates, entrances, exits, and access roads;
 - Land use within 1/4 mile of the proposed landfill's boundaries to include the location of all homes, schools, hospitals, etc.; and
 - Location of drinking water wells, surface water sources, dry runs, and wetlands, and
- Attach a cross-sectional view of the landfill showing the depth of the gully or low area and the proposed final elevations.
- If the landfill is located in the coastal zone, obtain and submit an approval letter from the Office of Ocean & Coastal Resource Management for the site.
- A site inspection by district EQC personnel must be scheduled to verify the water level in the augered holes. Upon inspection the corners of the fill area must be visibly marked with stakes.

VII. I have read this application and all attached documents. I agree to the requirements and conditions that are contained in it. I will adhere to all Federal, State, and local zoning, land use and other applicable local ordinances. Also, I agree to the admission of properly authorized persons at all reasonable hours for the purpose of sampling and inspection.

Name of Facility Representative (print): _____ Signature: _____

Facility Representative's Title: _____ Date: _____

Name of Operator Representative (print): _____ Signature: _____
(if different from facility representative)

Operator Representative's Title: _____ Date: _____

Name of Landowner (print): _____ Signature: _____
(if different from facility or operator representative)

Date: _____